This Page Is Inserted by IFW Operations and is not a part of the Official Record

BEST AVAILABLE IMAGES

Defective images within this document are accurate representations of the original documents submitted by the applicant.

Defects in the images may include (but are not limited to):

- BLACK BORDERS
- TEXT CUT OFF AT TOP, BOTTOM OR SIDES
- FADED TEXT
- ILLEGIBLE TEXT
- SKEWED/SLANTED IMAGES
- COLORED PHOTOS
- BLACK OR VERY BLACK AND WHITE DARK PHOTOS
- GRAY SCALE DOCUMENTS

IMAGES ARE BEST AVAILABLE COPY.

As rescanning documents will not correct images, please do not report the images to the Image Problem Mailbox.

04:12:06PM;ERIE PLASTICS

Please type a plus sign (+) inside this box

PTO/SB/81 (02-01)

Approved for use through 10/31/2002, OM9 0651-0035

U.S. Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it display a valid OMB control number.

Application Number 10/24/2003 Filing Date Robert J. Smith First Named Inventor **POWER OF ATTORNEY OR** Drain-Back Snap-On Pour Spout Firment Clos **AUTHORIZATION OF AGENT** Group Art Unit Examiner Name **ERIE-0302** Attorney Docket Number

I hereby appoint:						
Practitioners at COOR	Sustamer Number 36787		Place Customer Number Bar Code Label here			
Practitioner(s) na	med below:					
	Name Registration Number		ation Number			
as my/our attorney(s) or agent(s) to prosecute the application identified above, and to transact att business in the United States Patent and Trademark Office connected therewith.						
Please change the corre	spondence address for the above-i	dentified application	n to:			
The above-mention	ed Customer Number.	_				
OR		¬ \	Place Customer Number Bar Code			
Practitioners at Cus	stomer Number		Label here			
OR Firm or						
Individual Name						
Address						
Address						
City		State	Zip			
Country						
Telephone		Fax				
l am the:						
X Applicant/Invent	or.					
Assistant of ma	and of the entire interest. See 37 CF	R 3 71				
Statement under	Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).					
SIGNATURE of Applicant or Assignee of Record						
Name Ro	Robert J. Smith					
Signature	Signature					
Date 3/23/64						
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.						
	orms are submitted.					

Burden Hour Statement: This form is estimated to take 3 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Weshington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

:1 814 863 0410

01:52p -04; 12:06PM; ERIE PLASTICS

PTO/SBI/01 (10-01)

Approved for use through 10/31/2002. OMB 0651-0032

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

	Attorney Docket Numb	er ERIE-0302	
DECLARATION FOR UTILITY OR DESIGN	First Named Inventor	Robert J. Smith	
PATENT APPLICATION	COMPLETE IF KNOWN		
(37 CFR 1.63)	Application Number	10/693,268	
Declaration X Declaration	Filing Date	10/24/2003	
Submitted OR Submitted after Initia	Art Unit	Not Yet Assigned	
with Initial Flang (stronarge (37 CFR 1.16 (e)) required)	Examiner Name	Not Yet Assigned	

As the below named inventor, I hereby declare that:							
My residence, mailing address, and citizenship are as stated below next to my name.							
I believe I am the original and first inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled:							
DRAIN-BACK SNAP-ON POUR SPOUT FITMENT CLOSURE							
(Title of the Invention)							
the specification of which				-			
is attached hereto							
OR X was filed on (MM/DD/YYYY) 10/24/2003 as United States Application Number or PCT International							
Application Number 10/693,266	and was amend	ed on (MM/DD/YYYY)		(if applicable).			
I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56, including for continuation-in-part applications, material information which became available between the filing date of the prior application and the national or PCT							
international filing date of the continua							
I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or (f), or 365(b) of any foreign application(s) for patent, inventor's or plant breeder's rights cartificate(s), or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent, inventor's or plant breeder's rights certificate(s), or any PCT international application having a filing date before that of the application on which priority is claimed.							
Prior Foreign Application Number(s)	Country	Foreign Filing Date	Priority Not Claimed	Certified Copy Attached? YES NO			
	=	Comment of the Commen					
Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto:							

[Page 1 of 2]

Burden Hour Statement. This form is estimated to take 21 minutes to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, Washington, DC 20231. OO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

PTO/SB/01 (10-01)

Approved for use through 10/31/2002, OMB 0651-0032 U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no parsons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application Customer Number or Bar Code Label 36787 Direct all correspondence to: OR Correspondence address below Name ZIP State City Telephone Country I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may joopardize the validity of the application or any patent issued thereon. NAME OF SOLE OR FIRST INVENTOR: A petition has been filed for this unsigned inventor Robert J. **Smith** Given Name Family Name (first and middle (if any)) or Sumame laventor's Signature USA **USA** PA Edinboro Citizenship Residence: City Country 12834 Forrest Srive DRIVE Mailing Address USA 16412 **Edinboro** ZIP City Country A petition has been filed for this unsigned inventor NAME OF SECOND INVENTOR: Given Name Family Name (first and middle [if any]) or Surname inventor's Signature Residence: City State Citizenship Country Mailing Address Country Additional inventors are being named on the _supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto.

(Page 2 of 2)